

North Carolina

State Board of Elections 441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director RECEIVED

OCT 1 6 2013

MOUREBOE

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY:	
Committee Name:	Mike Fields Campaign Committee Tom Velevis
Freasurer Name:	Tom Velevis
Treasurer Address:	275 SE Broad St. Southern Pines, NC 28387
(include city, state, & zip)	Southern Pines, NC 28387
m N	910-692-4330
Treasurer Phone:	110-012 492-
election cycle under the pro- until the end of the election expenditures during this ele	mittee intends to neither receive nor expend more than \$1,000 during the current occedures set forth in G.S. 163-278.10A. This certification will remain in effect a cycle for this committee. If this committee exceeds \$1,000 in contributions or ection cycle, I understand that I must immediately notify the appropriate boarded campaign finance reports. AN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
m 1 . 1 . 1 . 1 . 1	Certification to remain at or under the \$1,000 threshold. I will now be required report for all contributions and expenditures that have not been previously g of the current election cycle. I further agree to file all future reports required.
10/15/13	Signature
' Date Signed	- 0

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

Maling Address (include City, State and Zip Code) P. O. Box 117 Sov. Rives, NC 28388 MOORE BOE Report Year 3. Period Start Date (mm/dd/yy) A. Period End (mm/d	Committee Information			THE PERSON NAMED IN COLUMN SAFER AND ADDRESS OF THE PERSON NAMED IN COLUMN SAF	c. ID Number	
P. O. Po x 117 Sov. P. No. 28388 MOORE BOE P. O. P.	Full Name		Han we	Charles Manual Land		
Address (include City, State and Zip Code) P. O. Box 117 Sov. fines, NC 28388 MOORE BOE P. O. Box 117 Sov. fines, NC 28388 MOORE BOE Phone Number 9/0-528-6 Phone N	Mike Fields Ca	mpaigr Com	IMITIER R	CHWELL	d. Date Filed	
Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name Report Year 3. Period Start Date (mm/dd/yy) 4. Period End Date (mm/dd/yy) 5. Treasurer Full Name Referendum	Mailing Address (include City,	State and Zip Code)		T 1 6 2013		2
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Type of Committee (Check One) State/County		9/13	10/15/1			
Candidate Campaign			Type of Report (c.	heck only one ty	pe of report from one ca	tegory)
PAC	Candidate Campaign			State/County	Referendum	
Independent Expenditure		-	Organizational			
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Other:		IE.	Mid Year	Semi-annual		
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Special Spec		this Report	Special	Final		
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A. Financial Institution Full Name C. Account Code Financial Institution Full Name b. Purpose c. Account Code d. Period Begin Balance \$ 10.15.44 CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Conference of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certification is complete, true and correct and that I have been trained by the NC State Board of Elections. Financial Institution Full Name d. Period Begin Balance \$ 10.15.44 CERTIFICATION I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Conference of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or other non-disclosed funds. I further certification funds are commingled with prohibited or			11 A	ccount Informa	ation	
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Please Note: This form cannot be used to amend committee information, or account information. assistant treasurer, custodian of books information, or account information.	Please Note: This	form cannot be used	to amend committe	e imormanon su	sount information	

Detailed Summary

MUDIC MEN'S FEBRUARY Amendment

Use this form to summarize all disclosure reporting forms and to total monetary information 3. ID Number 2. Type of Report 1. Committee Full Name (and Fund if applicable) Mike Fields Campaign Committee Total this Total this January 1, $\frac{20/3}{}$ Start of Election Cycle: **Election Cycle Reporting Period** 1.015.44 1.015.44 4) Cash on Hand at Start RECEIPTS \$ (CRO-1205) \$ 5) Aggregated Contributions from Individuals 1,050.00 1050.00 \$ (CRO-1210) 6) Contributions from Individuals \$ (CRO-1220) 7) Contributions from Political Party Committees \$ 8) Contributions from Other Political Committees (CRO-1230) \$ (CRO-1410) \$ 9) Loan Proceeds \$ (CRO-1240) 10) Refunds/Reimbursements to the Committee 11) Other Receipt Sources (CRO-1250) 11a) Interest on Bank Accounts 11b) Contributions from Not-For-Profit Organizations (CRO-1250) \$ \$ (CRO-1250) \$ 11c) Outside Sources of Income \$ \$ (CRO-1270) 11d) Legal Expense Fund - Other Sources \$ (CRO-1265) 11e) Exempt Purchase Price Sales 050.00 1,050.00 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,11d and 11e **EXPENDITURES** 13) Disbursements \$ 242.78 (CRO-1310) \$ 242.78 13a) Operating Expenditures \$ 13b) Contributions to Candidates/Political Committees (CRO-1310) \$ (CRO-1310) 13c) Coordinated Party Expenditures \$ (CRO-1315) \$ 14) Aggregated Non-Media Expenditures \$ (CRO-1420) 15) Loan Repayments \$ (CRO-1320) 16) Refunds/Reimbursements from the Committee \$ (CRO-1510) \$ 17) In-Kind Contributions 242.78 242.78 \$ 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17) 822.66 1.822.66 19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18 ADDITIONAL INFORMATION (CRO-1330) \$ 20) Non-Monetary Gifts Given to Other Committees 21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430) \$ (CRO-1610) \$ 22) Debts and Obligations owed by the Committee \$ (CRO-1620) 23) Debts and Obligations owed to the Committee (CRO-1720) \$ 24) Account Transfers Within the Committee \$ \$ (CRO-1710) 25) Administrative Support \$ (CRO-1440) \$ 26) Forgiven Loans \$ (CRO-2220) \$ 27) 48-Hour Notice Reports Sum \$ (CRO-1215) 28) Contributions to be Refunded

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Contributions	from	Individuals
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. Committee Full Name (and Fund if applicable) Mike Fields Campuign Committee 3. Contributor Information Full Name, Mailing Address & Phone (include city, state, & zip) Add Remove b. Job Title/Profession Project Planner	
Contributor Information Add Remove b. Job Title/Profession d. Comments (include city, state, & zip)	
Contributor Information Full Name, Mailing Address & Phone (include city, state, & zip) Plonect Planner	
(include city, state, & zip)	
PROJECT PLANNER	
Gerald Ridzon c. Employer's Name/Specific Field	
26 Lochwinnocken Community Spaces, LLC e. Election Sun	
1, Nehurst, NC 28319	n to Date
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f. Prior g. Account Code h. Form of Payment i. In-Kind Description j. Date (mm/dd/yyyy) k. Amoun	
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3. Contributor Information	
a. Full Name, Mailing Address & Phone b. Job Title/Profession d. Comments	
(include city, state, & zip) Poultrey Broker	
David Wilson c. Employer's Name/Specific Field	
6255. Valley Rd Wilson Brokerage e. Election Su	ım to Date
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910-695-0668 \$ 200.	
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Manager Colors Page Color

Contributions	from	Individuals
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	Dutions in	lividual contributions	over \$50 or cor	tributions under	\$50 if form CR	O 120	5 is not used
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•	78 Card	inalDR.		Legacy	Construction	e Fl	ection Sum to Date
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Disbursements	Pg / of / Yes
DIDDUIDUITUIT	contributions to candidate/politi

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

Committee Full	Name (and Fund	if applicable)				2. ID Number
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		use separate CRO	1210 5	rme for ano	h type of Dichu	rsement.)
Type of Disbur		use separate CRO	-1310 Ju	Committees	Coord	linated Party Expenditures
Operating Expens		ributions to Candidate			emove	
Payee Informa	tion				Committee Name	d. Comments
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Moore Coun	ty Board of	Elections	c.	Level Registe		
700 PINC	hurst Ave		L	Federal Control	County: Municipal	ity: e. Election Sum to Date
Cartha	ge, NC 2832;	7		State	Municipal	
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